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
CLINICAL AREA: _____

How' YOU Doin' in 2003?

Competencies
March 24, 2003

Instructions:

- ☐ Test your knowledge by asking yourself and at least 5 of your colleagues the following questions.
- ☐ Indicate in the boxes whether you **answered the question correctly (Y)** or **were not able to answer the question (N)**. Your manager or supervisor will be able to provide you with the correct answers.
- ☐ Give yourself and your colleagues a pat on the back for a job well done!!! Then, **send the results to Ginnie Daine by April 4, 2003 (Room 10/7D55)**.
- ☐ Got questions and you and your staff want to discuss a topic, simply check the box to the left of the topic.

	Critical Issue	1	2	3	4	5	6
	1. Describe the difference between training and competency.						
	2. List the Clinical Center competencies.						
	3. Describe the N&PCS orientation program and process.						
	4. Who identifies the need for a new competency?						
	5. What specific competencies are you required to maintain to do your job?						
	6. Describe how your competence to practice is assessed initially.						
	7. Describe how your competence to practice is assessed on an ongoing basis.						
	8. Who assesses competency in your patient care area?						
	9. How is your competence to practice documented?						
	10. How does your nurse manager determine if work assignments are consistent with an individual's competence and training?						
	11. How is the competence of the contract nurse or the float nurse assessed on your unit?						
	12. What is the process for preparing to practice with a new protocol or new equipment?						
	13. What is the process used to update you on new policies, procedures, and standards of practice?						
	14. How does your unit determine what educational programs you need to meet your learning needs?						
	15. What annual training is required of you?						

- ☐ **We would like to discuss this topic further with someone!! (Check box if indicated)**

How' YOU Doin' in 2003?

The Answer Sheet☺

Competencies March 24, 2003

1. Describe the difference between training and competency. <ul style="list-style-type: none">▶ Training is knowledge acquisition r/t a particular skill. For example, how to use a piece of equipment.▶ Competency is the demonstration of an identified behavior integrating knowledge, skills, and critical thinking.<ul style="list-style-type: none">• Per JCAHO definition, it is the determination of an individual's capability to perform up to defined expectations.• Competencies are developed, assessed, and documented for all employees providing care and/or services to patients in the Clinical Center (CC).▶ N&PCS policy is located @ http://intranet.cc.nih.gov/nursing/Policies/compval.pdf
2. List the Clinical Center competencies. <ul style="list-style-type: none">▶ Safety and Emergency Preparedness▶ Performance Improvement▶ Diversity Appreciation and Communication▶ Customer Service
3. Describe the N&PCS orientation program and process. <ul style="list-style-type: none">▶ At the Clinical Center, there is a 3-tiered competency process<ul style="list-style-type: none">• CC Core Competencies . . . validated within 45 days of EOD and annually• Readiness to Practice competencies . . . validated within 45 days of EOD and annually• Program of Care (aka "job-specific") competencies . . . validated initially during a time period defined by the supervisor and the employee and then, annually▶ Nurses complete a 5-day N&PCS orientation which includes the following elements:<ul style="list-style-type: none">• Protecting Human Research Subjects• Mandatory Reviews• How to access N&PCS policies, procedures, and standards of practice• Confidentiality• Introduction to Readiness for Practice Competencies• MIS Training (usually completed in the first week)
4. Who identifies the need for a new competency? <ul style="list-style-type: none">▶ Anyone can identify a need for a competency. Needs are identified from:<ul style="list-style-type: none">• new standard of practice, procedure, or policy• performance improvement data• documentation review• performance evaluations• Can you think of others??
5. What specific competencies are you required to maintain in order to do your job? <ul style="list-style-type: none">▶ Describe the unique skills and competencies of your patient care area.
6. Describe how your competence to practice is assessed initially. <ul style="list-style-type: none">▶ Describe the orientation process in your patient care area. Be sure to include a discussion of the following:

<ul style="list-style-type: none"> • Selection of a preceptor • Assessment of learning needs • Direct observation of skills and demonstrated behaviors • Checklists used to validate competencies • Feedback and communication of assessments between preceptor, nurse manager, and others
<p>7. Describe how your competence to practice is assessed on an ongoing basis.</p> <ul style="list-style-type: none"> ▶ Direct observation ▶ Ongoing assessment ▶ Documentation review
<p>8. Who assesses competency in your patient care area?</p> <ul style="list-style-type: none"> ▶ Nurse Manager ▶ Clinical Nurse Specialist ▶ Clinical Nurse (peers)
<p>9. How is your competence to practice documented?</p> <ul style="list-style-type: none"> ▶ The nurse manager documents employees' competence using the N&PCS Competence Assessment and Performance Evaluation (CAPE).
<p>10. How does your nurse manager determine if work assignments are consistent with an individual's competence and training?</p> <ul style="list-style-type: none"> ▶ The competency assessment review process considers the following elements: <ul style="list-style-type: none"> • Job description • An employee's formal education and training • Verification of licensure and certification, if applicable • Initial competency assessments • Most recent performance evaluation including competency skills lists • Completion of required CC orientation and Department orientation ▶ The NM and the employee communicate regularly about the needs of the current patient population, changes in protocols, newly approved protocols, etc. ▶ The NM regularly observes work flow and directs changes in assignments as needed. ▶ ANSOS is a resource management system and contains all N&PCS personnel, job, skill level, competencies. This information is readily available to all NMs on their desktop.
<p>11. How is the competence of the contract nurse or the float nurse assessed on your unit?</p> <ul style="list-style-type: none"> ▶ First and foremost, peer-to-peer, we assess strengths and weaknesses. Assignments are tailored accordingly and a resource is provided throughout the shift to assist with managing the assigned work and the interdisciplinary teams. Formally though . . . ▶ Agency Nurses (only in ICUs) ▶ Contract Nurses complete a 2-day N&PCS orientation which includes the following elements: <ul style="list-style-type: none"> • Protecting Human Research Subjects • Mandatory Reviews • How to access N&PCS policies, procedures, and standards of practice • Confidentiality • Introduction to Readiness for Practice Competencies • MIS Training • "Readiness to Practice" competencies completed on the patient care unit • Program of Care competencies on the patient care unit. • Float Nurses complete the same orientation to the CC and N&PCS as all nurses in the department • Float pool clinical competencies are divided into 5 sets: <ul style="list-style-type: none"> • Oncology-Hematology

<ul style="list-style-type: none"> • Medical-Surgical • Pediatric • Behavioral Health • Critical Care <ul style="list-style-type: none"> ▶ The float pool nurse selects a primary competency set based on their area of expertise, completes all competencies in that set and completes an orientation on all selected units within the set. This completes the initial phase of orientation. Once in the float pool, the nurse continues to work toward completion of additional competency sets. ▶ Float pool nurses are assigned to work on all units with the exception of pediatrics and behavioral health.
<p>12. What is the process for preparing to practice with a new protocol or new equipment?</p> <ul style="list-style-type: none"> ▶ Describe your patient care program and your collaboration with Institute colleagues. Some areas may describe the following relationships: <ul style="list-style-type: none"> • PIs and/or research nurses provide inservice training on protocols • CNSs provide training and education on protocols, populations recruited to the protocol, unique care needs, training on new procedures and new equipment. • Clinical Pharmacists will provide education on study drugs PRN • Protocol abridgements are developed in collaboration with unit staff and research teams • Variety of training media are used: <ul style="list-style-type: none"> • Computer based training • Audio and videotapes • Lecture • Posters and bulletin boards • Flyers and newsletters • Email communications • 1:1 and group training • Can you think of others?
<p>13. What is the process used to update you on new policies, procedures, and standards of practice?</p> <ul style="list-style-type: none"> ▶ Information received at Nursing Practice Council is disseminated to employees in patient care areas by the NM. ▶ The Quick Updates is an informal N&PCS newsletter used to updates N&PCS employees on practice issues and updates.
<p>14. How does your unit determine what educational programs you need to meet your learning needs?</p> <ul style="list-style-type: none"> ▶ We look at clinical research conducted in our patient care area ▶ We identify procedures that we consider high risk and/or low volume ▶ We use a number data resources, ie., PI data, ORS data, variety of professional audits, etc. ▶ We consider external events that help us improve our work and patient safety ▶ Can you think of others??
<p>15. What annual training is required of you?</p> <ul style="list-style-type: none"> ▶ Computer security ▶ Sexual Harassment (every 2 years) ▶ Code Blue ▶ CPR (every 2 years) ▶ D'Medici modules <ul style="list-style-type: none"> • Fire Safety • Infection Control • Age Appropriate Care • Radiation Safety

- Handling of Hazardous Materials
- Back Safety